STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

RECEIVED

FEB 0 1 2019

I. Name of Lobbyist(s) Christpher Rauscher				NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's	partnership, firm or co	rporation, if any:		SECTION OF STATE
(Nam	ne of partnership, firm or cor	poration)		
595 Market Stree	et, 29th floor	San Francisco	CA	94105
Business Address: (Str	cet)	(Town/City)	(State)	(Zip Code)
(207 400-1150 ()			c-mail policyc	ompliance@sunrun.com
(Telephone)		(Fax)		
	vers: (Choosc one – filc ansactions which are no			nay filc a separate report for
☐ All reportable trans	sactions occurring in the n	nonths prior to the re	porting date relative to	the following client:
OR	(Full Name of Client as it a	appears on the Lobbyist	Registration Form)	
		cluding the lobbyist'	s family), or the lobbyi	ng firm listed below which are
IV. Date of Report Reports cover: activi	April 25, 2018 ity from date of registration to 3/31/18		July 25, 2018	
•	October 31, 2018 activity from 7/1/18 to 9/30/18		January 30, 2019	
	no fees received and to complete just this form and			
VI. Check if addition:	al reports are attached:			
☐ If you have receive	ed fees or made expenditu	ires, you must file Ad	dendum A – Fces and I	Expenses
☐ If you have paid an Expense Reimburseme	n honorariu <mark>m or re</mark> imburse nt	ed expenses, you mus	st file Addendum B– R	eport of Honorariums or
☐ If you, your firm, o	or your family has made p	oolitical contributions	, you must file Addend	um C- Political Contributions
	SA 15-B, RSA 14-C and st of my knowledge and b		swear or affirm that the	foregoing information is true
(Print Name of lobby)	st)	<u> </u>		